Appendix A

NATIONAL CENTER FOR HEALTHCARE APPRENTICESHIPS
STANDARDS OF APPRENTICESHIP

Developed by

SEIU/AFSCME National Center for Healthcare Apprenticeships –
National Joint Apprenticeship Training Committee (NJATC)

WORK PROCESS SCHEDULE

AND

RELATED INSTRUCTION OUTLINE
Description: Community Health Workers (CHWs) are frontline public health workers who are trusted members of and/or have an unusually close understanding of the community they serve. This trusting relationship enables CHWs to serve as a liaison/link/intermediary between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery.

CHWs also build individual and community capacity by increasing health knowledge and self-sufficiency through a range of activities such as outreach, community education, informal counseling, social support and advocacy. (American Public Health Association, 2008)

The CHW serves as a bridge between the community and the health care, government and social service systems.

Key work duties vary by employment location but may include the following as determined by the American Public Health Association Community Health Worker Special Primary Interest Group.

The CHW’s responsibilities can include:

- helping individuals, families, groups and communities develop their capacity and access to resources including health insurance, food, housing, quality care and health information;
- facilitating communication and individuals’ empowerment in interactions with health care/social service systems;
- helping health care and social service systems become culturally relevant and responsive to their service population;
- helping people understand their health condition(s) and develop strategies to improve their health and well being;
- helping build understanding and social capital to support healthier behaviors and lifestyle choices among people;
- delivering health information using culturally appropriate terms and concepts;
- linking people to health care/social service resources;
- providing informal counseling, support and follow-up;
- advocating for local health needs;
• providing health services, such as monitoring blood pressure and providing first aid;
• making home visits to chronically ill patients, pregnant women and nursing mothers, individuals at high risk of health problems, and the elderly; and
• translating and interpreting for individuals and health care/social service providers.

Currently in the healthcare industry, employers are using increasing numbers of CHWs. However, some employees use different job titles for workers who require the same competencies as a CHW (Some examples of these titles follow: Community Outreach Worker, Community Health Navigator, Community Health Counselor or Educator, Community Health Organizer, Care Coordinator.) Employers who use these different titles have recognized that the CHW apprenticeship registered by the NCHA meets the training and competency requirements of this workforce. Employers who wish to participate in the NCHA CHW Apprenticeship Program, but who use a different but related job title for their workforce, will sign a document approving the NCHA CHW Registered Apprenticeship program as a qualification for hire into their related position as a condition of their participation in the CHW Apprenticeship Program.

Apprentices will receive training in the various work experiences listed below. The order in which the apprentice learns will be determined by the flow of work in the job, and will not necessarily be in the order listed. Times allotted to these various processes are estimated for the average Apprentice to learn each phase of the occupation and demonstrate competency. Given the broad diversity in settings and populations served, work-based learning requirements may be appropriately modified and customized to meet the unique requirements of support environments.

1. TYPE OF OCCUPATION
   - ☐ Time-based
   - ☐ Competency-based
   - ☒ Hybrid

2. TERM OF APPRENTICESHIP

   The term of apprenticeship is based on a specified range of hours of on-the-job learning and the successful demonstration of mastery of the competencies specified in these Standards, supplemented by the required hours of related instruction as described in the work process schedule. Workers with 6 months or more documented experience working in a healthcare organization and/or a community based or other service organization may be granted up to 1000 hours of credit towards the OJL component of their apprenticeship. Other apprentices can submit evidence of relevant experience that addresses their required competencies in the apprenticeship program either prior to becoming an apprentice or within the first 3 months of their apprenticeship experience. This evidence will be reviewed by the sponsor or its local subcommittee to determine credit.
3. **RATIO OF APPRENTICES TO JOURNEYWORKERS**

The apprentice to journeyworker ratio is: 3 apprentices to 1 journeyworker/mentor.

4. **APPRENTICE WAGE SCHEDULE**

Apprentices shall be paid a progressively increasing schedule of wages based on either a percentage or a dollar amount of the current hourly journeyworker wage rate. These rates will be determined by the local CBAs or by the NJATC subcommittee for the region.

5. **WORK PROCESS SCHEDULE** (see below)

The sponsor, through its local NJATC subcommittee may modify the work processes to meet local needs including for the purpose of addressing local labor market concerns and/or the desire to co-register with a local registration agency.

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**Hybrid model**

**Work Experience**

**Competencies**

**Approximate Hours (Min/Max)**

| I. Introduction to the Community Health Worker role and Orientation to the Work Environment | 60-80 |

a. **Orientation to the role of the Community Health Worker: Understands the following:**

(1.) Job description and requirements;
(2.) Apprenticeship requirements
(3.) CHW values, scope of work, and inter-professional relationships
(4.) Specific employer history/mission & fulfillment of employer’s philosophy; policy and procedures
(5.) Co-worker, mentor and supervisory relationships, and support structures such as employee assistance programs, benefits, etc.
(6.) Overview of upcoming regular and specialized social and other employer events
(7.) Overview of the philosophy and definition of patient care models (including coordinated care)
(8.) Understand the application of “Do no Harm” from the perspective of the CHW

b. **Overview of specialized and technical knowledge unique to the work environment**

(1.) Familiarity with characteristics of the individual(s) served including socio-economic characteristics, culture, health and medical concerns
(2.) Application of terminology necessary for the work environment;
(3.) Operation and maintenance of computer and video conferencing equipment;
(4.) Understanding of health and medical concerns unique to the work environment;
(5.) Familiarity with mechanisms of data collection and documentation.
(6.) Familiarity with the structure and components of a care plan, the utilization of that plan to coordinate and monitor care, and the team work required to implement the plan.

c. Cultural Competence  180 - 200
(1.) Application of culturally appropriate interventions that enhance the functioning of patient/constituent systems
(2.) Demonstration of cultural sensitivity and the ability to reflect on one's own pre-conceptions in order to support patients/clients from different cultures and communities.

II. Organizational Skills  130 - 150
(1.) Ability to record and maintain information on individuals, referrals, and appointments
(2.) Ability to utilize electronic Health Record System and Health Information Exchange
(3.) Ability to manage time and set priorities
(4.) Ability to utilize the appropriate technology for reporting and communication
(5.) Ability to use reflection to support ongoing organizational learning

III. Employee and individuals’ safety in the medical/community environment (some areas based on employment location)  130-150
(1.) Demonstrated understanding of blood borne pathogens/universal precautions/infection control and hand washing;
(2.) Demonstrated ability to perform CPR/Basic First Aid;
(3.) Ability to assess community safety;
(4.) Recognize and correct hazards in the workplace and knowledge of protocols for reporting hazards;
(5.) Demonstrated understanding of safety precautions for home or community visits;
(6.) Ability to respond appropriately to emergencies
(7.) Ability to assess reasonable risk and apply common sense.

IV. Ethical and professional practice  130-150
(1.) Demonstrated ability to put CHW ethics into practice;
(2.) Knowledge of career and educational paths available;
(3.) Demonstrated ability to function as a culturally competent practitioner including understanding of the culture of patients and recognition of own biases;
(4.) Demonstrated inter-professional team work and collaboration skills;
(5.) Knowledge and application of rules of confidentiality including HIPAA;
(6.) Application of understanding of Patient Bill of Rights
(7.) Ability to make decisions and solve problems consistent with the CHW scope of practice;
(8.) Understanding and application of professional boundaries and ability to abide by them
(9.) Application of stress management skills.

V. Communication

(1.) Effective and culturally appropriate communication skills including the ability to utilize various communication techniques (e.g. teachback) and devices (e.g. apps, smart phones, etc.) and to communicate in person, by phone, and electronically
(2.) Basic group communication and facilitation skills including the ability to make presentations to groups;
(3.) Demonstration of effective, efficient and timely documentation;
(4.) Application of knowledge on when to obtain and utilize interpreters;
(5.) Ability to apply active listening skills and to listen without judgment
(6.) Ability to apply conflict resolution techniques
(7.) Ability to provide positive support to patients and co-workers
(8.) Ability to utilize positive behavior support;
(9.) Ability to utilize Motivational Interviewing effectively including a demonstrated understanding of behavioral change mechanisms

VI. Development of community based networking and advocacy (customized for specific region and employer) 235-250

a. Community Networking

(1.) Mastery of community resource asset mapping – identification and understanding of individual and institutional resources and when to make referrals
(2.) Ability to use individualized strategies to help community members manage chronic conditions including ways to support medication compliance;
(3.) Ability to help patients/community members create and maintain social support systems both formal and informal;
(4.) Demonstrated understanding of the relationship of care coordination and transitions of care
(5.) Application of community organizing principles as appropriate for region and employer
(6.) Eliciting, respecting, and actively supporting participant choices and preferences;

b. Advocacy, Supporting Empowerment 235-250

(1.) Ability to assess needs of the community
(2.) Ability to promote empowerment and self-confidence and education of individuals/community for self advocacy;
(3.) Ability to identify issues related to the population served;
(4.) Demonstration of ability to help individuals and communities to act collaboratively;
(5.) Knowledge of common challenges to human, civil and legal rights and the ability to utilize that knowledge for the benefit of the community
(6.) Understanding and application of principles of health coaching

VII. Health Literacy (Customized to employer and community needs) 280-300

(1.) Knowledge of and ability to communicate principles of preventive health and dentistry;
(2.) Ability to communicate characteristics of a healthy lifestyle;
(3.) Basic knowledge of chronic diseases and their relationship to the healthcare system which—depending on the environment—may include diabetes, hypertension, heart disease, stroke, HIV/AIDS, asthma, mental illness, substance abuse, and other health concerns
(4.) Ability to respond to common health concerns;
(5.) Supporting individuals in understanding and participating in routine and special health care screening and treatment
(6.) Ability to communicate principles of safety including - as appropriate- environmental, personal, and driving;
(7.) Identifying health resources, judging quality, and coordinating/communicating with health care practitioners;
(8.) Recognition of health issues particularly those relevant to the local community and understanding of social determinants of health

VIII. Teaching and Supporting Others 255-270

(1.) Implementation of adult learning principles and utilization of effective teaching strategies including ability to customize instructional strategies to meet individual needs
(2.) Ability to mentor patients/clients
(3.) Ability to provide constructive feedback;
(4.) Teaching skills customized to the individuals;
(5.) Presentation skills;
(6.) Ability to utilize common A/V equipment and organize materials for presentations

*Estimated hours to complete competencies 2000-2200
### Related Instruction

These courses can be completed before apprentices are hired as apprentices or can be completed during the apprenticeship period. It is recognized that the content outlined below may be delivered through different named courses provided by different educational institutions as long as they cover the required content area.

### Required Technical Instruction with approximate times for didactic instruction

#### Content Area: Coordinated Care, Healthcare reform and the role of the CHW

20 hrs

1. The evolution of the CHW field including the range of roles, core competencies, and functions of a CHW
2. Reflection on the role of CHW and one’s ability to become a role model for patients and community members
4. Identification of potential populations with whom CHWs may work, including biological, psychological, social, cultural, spiritual and environmental considerations.
5. Social determinants of health
6. Engage in self-reflection to understand one’s personal perspective and health practices, in order to become a role model for patients.

#### Content Area: Using technology for learning, writing, note taking and reporting

18 hrs

1. Basic Health Information Management knowledge for reporting and other job related functions
2. Orientation to online learning and the internet
3. Record keeping and communication via computer based systems
4. Operation and maintenance of computer and video conferencing equipment
5. Writing for reporting and communication – with assessment and follow up support as needed

#### Content Area: Organizational Skills

4 hrs

1. Recording and maintaining information on individuals, referrals and appointments;
2. How to plan, organize and set-up presentations, training sessions, workshops, and other activities;
3. Time management.

#### Content Area: Understanding Healthcare Culturally

20 hrs
(1.) Define “culture” and “cultural competency” in the context of the role of CHWs and the healthcare workplace.
(2.) Ways to work with different populations that include varied nationalities, religions, abled and disabled, genders, and LGBT
(3.) Assess one’s level of cultural competency and determine and reflect on next steps in continued development.
(4.) Understand culturally appropriate interventions that enhance the functioning of patient/constituent systems.
(5.) Obtain feedback from peers and instructors for self-improvement.

**Content Area: Communication Skills**

(1.) Communication styles in different cultures
(2.) Practice use of language confidently and appropriately;
(3.) Methods of speaking and writing to individuals in their preferred language at an appropriate comprehension level including potential for using translators
(4.) Understand how active listening and the use of paraphrasing/reflective expression support positive interactions;
(5.) Techniques for effective communication with Patients and Teams including understanding closed and open ended questions, verbal and non verbal styles, teach back, and other techniques for different settings
(6.) Group presentation
(7.) Documentation and reporting - principles and practice
(8.) Understand how judgments bias, and assumptions impact communication and relationship building
(9.) Understand how situations may trigger both positive and negative reactions and identify strategies to handle responses objectively

**Content Area: Motivational Interviewing**

(1.) Define motivation and understand the challenges and opportunities of behavioral change in health systems and community settings
(2.) Learn techniques of motivational interviewing and practice with feedback from mentors and peers
(3.) Reflect on personal experience in changing behavior
(4.) Develop an understanding of how culture and behavioral change interact
(5.) Understand the theories of change, harm reduction and risk reduction

**Content Area: Health and Safety - employee and patient**

(1.) Universal precautions, infection control, and blood borne pathogens
(2.) CPR and First Aid
(3.) Recognizing an emergency and understanding response protocols
(4.) Risk assessment in the community and home
(5.) Stress management and self care – how to stay healthy as a CHW

**Content Area: Ethical and Legal issues for the CHW**

(1.) Understand confidentiality and its importance for the CHW
(2.) Define ethics and its role in CHW work including requirements for mandatory reporting
(3.) Learn about HIPPA and its application and communication across different cultural settings
(4.) Understand the Patient’s Bill of Rights and other patient protections and rights as applicable
(5.) Reflect on what it means to “Do no Harm” as a CHW
(6.) Liability, negligence, malpractice, and scope of practice.

Content Area: **Interpersonal Skills**

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<td>(1.) Methods for representation of others, their needs and the needs of the community;</td>
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<td>(2.) Understand standards for sensitivity, respectfulness, and empathetic behavior</td>
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<td>(3.) How to be effective in establishing relationships with individuals and service providers;</td>
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<td>(4.) Methods to assist individuals and groups in resolving conflicts and the importance of addressing those conflicts personally and professionally;</td>
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<td>(5.) How to recognize and appropriately respond to the beliefs, values, culture and languages of the populations being served;</td>
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<td>(6.) Understand the importance of boundaries in personal and professional setting.</td>
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Content Area: **Service Coordination Skills**

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<td>(1.) Referral processes and follow up procedures</td>
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<td>(2.) Building networks to address community needs – theory and practice;</td>
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<td>(3.) Methods to improve access to resources;</td>
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<td>(4.) Becoming a liaison between organizations and specific groups.</td>
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Content Area: **Capacity-Building Skills**

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<tr>
<td>(1.) Understand how to encourage and empower individuals to be self-sufficient by identifying problems and resources to solve problems;</td>
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<td>(2.) Learn methods for building local partnerships for improvement of service delivery;</td>
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<td>(3.) Learn methods that assist individuals in identifying and pursuing community goals;</td>
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<td>(4.) Learn ways of serving the community through formal and informal training;</td>
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<td>(5.) Ways to help build leadership skills in community members;</td>
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<td>(6.) Learn methods for assessing the needs of the community.</td>
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Content Area: **Advocacy Skills**

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<td>(1.) Promote a cause and organize individuals and existing resources and data to support the cause;</td>
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<td>(2.) Identify advocacy groups and develop plans for working with them;</td>
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<td>(3.) Learn methods to keep abreast of structural and policy changes in the community and health and human services systems;</td>
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<td>(4.) Learn methods that help individuals or communities to overcome barriers and withstand intimidation.</td>
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<td>(5.) Knowledge of consumer rights</td>
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<td>(6.) Advocating for yourself - Anticipate workplace change and is impact on your career aspirations and reflect on ways to continue your knowledge acquisition</td>
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Content Area: **Teaching Skills**

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<th>16 hrs</th>
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(1.) Learn principles of adult learning and adult teaching strategies
(2.) Understand methods that motivate, inspire and promote learning in one-on-one or
group settings
(3.) Understand instructional, mentoring and coaching techniques that address various
learning styles;
(4.) Customize instruction to individuals and situations
(5.) Identify and explain the goals and objectives of a training program
(6.) Evaluate the success of a training program and progress of individual learners;
(7.) Provide reliable information appropriate to the needs of the learner;

Content Area: Knowledge Base on Specific Health Issues (this course may be
customized to particular employer needs) 20 hrs

(1.) Understand basic medical terminology and how to find reliable health information on
the internet
(2.) Gain and share basic knowledge of health and human services and specific health
issues in the community;
(3.) Understand basic preventive health strategies and characteristics of a healthy lifestyle
including the role of diet, exercise and smoking cessation
(4.) Gain a basic knowledge of chronic diseases and how they relate to the healthcare
system including diabetes, asthma, hypertension, heart disease, stroke, infectious
diseases (e.g. Hepatitis A,B,C, HIV/AIDS, STDs) (more advanced knowledge on
specific diseases and conditions can be added or customized for specific employment
situations)
(5.) Understand the connection between mental health and chronic disease management
and the basic characteristics of common mental illness such as depression and
schizophrenia
(6.) Understand the basic characteristics of substance abuse, domestic violence, loss and
grieving
(7.) Recognition and understanding of the special health needs of particular
communities such as homeless, substance abusers, youth, frail elders,
particular immigrant communities, pregnant parenting women and their
families, communities of color, linguistic minorities.
(8.) Using the internet and other resources to find information on specific health topics.

Approximate Total Training Hours for Core Competencies: 168

Apprentices may receive credit for previous training and in the case of computer
training can test out if they can demonstrate the required level of skill and
knowledge.

Supplemental coursework can be added to address the special needs of
participating agencies while allowing the Apprentice to lattice into other
healthcare positions, if desired. Certified CHWs can add additional coursework to
gain beneficial skills to remain a CHW or can focus on tracks leading to
movement into another career lattice depending on their interest, skills, and
employer needs. For example, one pathway could focus coursework on additional
social service skill allowing the CHW to work toward an Associates Degree in
Social Science or similar. Another track might focus on added clinical skills allowing transition into multiple allied health or nursing opportunities. By diversifying the supplement coursework, CHWs may if desired be enabled to transition into additional healthcare training programs for professional growth and movement. However, it is understood that many individuals will value the CHW role as a long term career choice.

Some courses that could be developed with approval by the regional NJATC subcommittees could include the examples below as well as others to be determined based on regional interests of employers and CHWs.

**Example 1**
- Case Management Skills

**Example 2**
- Nutrition, Exercise and Consumer Education

**Example 3**
- Quality Health Care Expectations;
- Assessing Health Indicators

**Example 4**
- Diabetes;
- Cardiovascular Disease;
- COPD;
- Asthma;
- Vaccinations

Assessment

Assessment for the didactic portion of the apprenticeship will be the responsibility of the educational provider.

Assessment of the work experience competencies will be conducted by participating employers in collaboration with their labor partners (where appropriate) and under guidelines provided by the sponsor.

Assessments may include a combination rubrics in addition to scenario based assessments, portfolios, self reflective journals that account for time on competencies and learned skills, demonstration and observation, and other methods that may be developed over time.

Following is an example of the current rubric developed by the sponsor that will be shared with local partners and the local NJATC subcommittees.
Core Rubric for competency evaluation for National Hybrid CHW program: This rubric may be modified by local programs to meet local variations among employers and participating partners

<table>
<thead>
<tr>
<th>Basic competency categories</th>
<th>Not Applicable</th>
<th>Does not demonstrate competencies</th>
<th>Understands reason for competencies can perform with direct assistance from mentor</th>
<th>Demonstrates competencies at a beginner level</th>
<th>Demonstrates competencies at an exceptional level</th>
<th>Comments/Recommendations for improvement, next steps, or completion</th>
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<tbody>
<tr>
<td>II. Introduction to the Community Health Worker role and Orientation</td>
<td>Demonstrates orientation to the role of CHW</td>
<td>Demonstrates specialized and technical knowledge unique to the work environment</td>
<td>Demonstrates Cultural Competence</td>
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<td>II. Demonstrates Organizational Skills required of CHW</td>
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<td>IV. Demonstrates Ethical and professional practice relevant to CHWs</td>
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<td>Utilizes effective and culturally competent communication skills</td>
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<td>Utilizes positive behavior supports including motivational interviewing skills</td>
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<td>VI. Effective community based skills, networking and advocacy skills</td>
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<td>Demonstrates ability to utilize Community Networking to improve health outcomes</td>
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<td>Applies principles of Advocacy and empowerment to Community Health Work</td>
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<td>VII. Health Literacy (Customized to employer and community needs)</td>
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<td>Demonstrates understanding of health literacy appropriate for employer needs</td>
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<td>Demonstrates understanding of adult learning principles</td>
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<td>Ability to apply those principles to teaching, facilitation, and presentations as appropriate for specific employers</td>
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